| IN RE APPLICATION SERVAL NO.: 09/89 | APPLICATION:OF: WEI-CHE YU L NO.: 09/894,128 | | | GROUP ART UNIT: 2143 | |
|---|---|--|---|-----------------------|--|
| 4 | | | | EXAMINER: A. Bilgrami | |
| 3 2005 FOR: MANAGEMENT PROTOCOL FOR NETWORK APPARATUS | | | ATTY. REFERENCE: YUWE3002/BEU | | |
| COMMISSION P.O. Box 1450 Alexandria, VA | | TENTS | | | |
| Sir: | th is a commun | ication/amendmen | nt in the above-id | entified application. | |
| ☐ Small entity | status under 3 | 7 CFR 1.9 and 1.2 | 27 is claimed. | | |
| □ No addition | al fee is require | ed. | | | |
| The fee, if any, has | been calculated | as shown below: | | | |
| Fee Basis | Number of Claims After Amendment | Highest Number Previously Paid For | Extra Claims | Small Entity | Full Fee |
| Total Claims | | - 1 | = 3 | × \$ 25 = | × \$ 50 = |
| Independent Claims | | - 2 | = 3 | × \$100 = | × \$ 200 = |
| ☐ First Presentation of Proper Multiple Dependent Claim | | | aim | + \$180 = | + \$360 = |
| | <u> </u> | | TOTAL | | |
| | ¹ If less than | 20 enter 20 . | ² If less than 3 enter | 3. If less than 0 e | nter 0. |
| is attached. A check in the a The Commission due under 37 Checopy of this she | amount of <u>\$</u> ner is hereby au FR 1.16 and 37 et is attached. | ithorized to charge CFR 1.17 or cred | s attached. e any additional f it any overpayme | THATE (2. MONT | communication, includ Number 02-0200 . A d |
| | s/are: PETT | ION FOR EXT | LENSION OF | TIME (2 - MONT | 113) W/FEE |
| | | | | | |
| | | | | | |
| 23364 | | | Respectfully submitted, | | |

Customer Number Phone: (703) 683-0500

DATE: February 23, 2005

Benjamin E. Urcia
Altorney for Applicant
Registration Number: 33,805